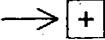


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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

Declaration Submitted OR  Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number		6033-020
First Named Inventor		Frank CHILESE
<b>COMPLETE IF KNOWN</b>		
Application Number	New Application	
Filing Date	Herewith	
Group Art Unit		
Examiner Name		

**As a below named inventor, I hereby declare that:**

My residence, post office address, and citizenship are as stated below next to my name:

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**"APPARATUS AND METHOD FOR MAINTAINING UNIFORM AND  
STABLE TEMPERATURE FOR CAVITY ENHANCED OPTICAL  
SPECTROSCOPY"**

the specification of which *(Title of the Invention)*

is attached hereto

OR

was filed on (MM/DD/YYYY)  as United States Application Number or PCT International

Application Number  and was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

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## DECLARATION — Utility or Design Patent Application

Direct all correspondence to:  Customer Number  
or Bar Code Label  OR  Correspondence address below

Name Law Office of John Schipper

Address 111 N. Market Street

Address Suite 808

City San Jose State California ZIP 95113

Country U.S. Telephone (408) 293-9934 Fax (408) 293-2183

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**NAME OF SOLE OR FIRST INVENTOR:**  A petition has been filed for this unsigned inventor

Given Name Frank Family Name CHILESE  
or Surname

Inventor's Signature *Frank Chilese* Date 07/14/2003

Residence: City San Ramon State CA Country USA Citizenship U.S.A.

Mailing Address 7366 Sedgefield Avenue

Mailing Address

City San Ramon State CA ZIP 94583 Country USA

**NAME OF SECOND INVENTOR:**  A petition has been filed for this unsigned inventor

Given Name Bernard Family Name FIDRIC  
or Surname

Inventor's Signature *B. Fidric* Date 07/17/03

Residence: City Cupertino State CA Country USA Citizenship USA

Mailing Address 11713 Westshore Court

Mailing Address

City Cupertino State CA ZIP 95014 Country USA

Additional inventors are being named on the one supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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PTO/SB/81 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035

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**FRANK CHILESE, ET AL.**

Application Number	New Application
Filing Date	Herewith
First Named Inventor	Frank CHILESE
Group Art Unit	N/A
Examiner Name	N/A
Attorney Docket Number	6033-020

I hereby appoint:

Practitioners at Customer Number

**OR**

Practitioner(s) named below:

Name	Registration Number
Herbert Burkard	24,500
John Schipper	26,994

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number.

**OR**

<input checked="" type="checkbox"/> Firm or Individual Name	LAW OFFICE OF JOHN SCHIPPER			
Address	111 N. Market Street			
Address	Suite 808			
City	San Jose	State	California	ZIP 95113
Country	U.S.A.			
Telephone	(408) 293-9934	Fax	(408) 293-2183	

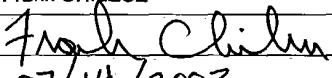
I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

**SIGNATURE of Applicant or Assignee of Record**

Name	Frank CHILESE
Signature	
Date	07/14/2003

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.  
Submit multiple forms if more than one signature is required, see below\*.

\*Total of 2 forms are submitted.

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PTO/SB/81 (10-00)

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**FRANK CHILESE, ET AL.**

	<b>Application Number</b>	New Application
	<b>Filing Date</b>	Herewith
	<b>First Named Inventor</b>	Frank CHILESE
	<b>Group Art Unit</b>	N/A
	<b>Examiner Name</b>	N/A
	<b>Attorney Docket Number</b>	6033-020

I hereby appoint:

Practitioners at Customer Number

OR

Practitioner(s) named below:

Name	Registration Number
Herbert Burkard	24,500
John Schipper	26,994

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number.

OR

<input checked="" type="checkbox"/> Firm or Individual Name	LAW OFFICE OF JOHN SCHIPPER				
Address	111 N. Market Street				
Address	Suite 808				
City	San Jose	State	California	ZIP	95113
Country	U.S.A.				
Telephone	(408) 293-9934	Fax	(408) 293-2183		

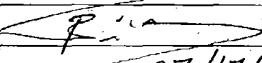
I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

**SIGNATURE of Applicant or Assignee of Record**

Name	Bernard FIDRIC
Signature	
Date	07/17/2003

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.  
Submit multiple forms if more than one signature is required, see below\*.

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